

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



In re patent application of

Hans Hansen.

Serial No. Unassigned

Filed: October 16, 2000

Group Art Unit: Unassigned

Examiner: Unassigned



For: MULTI-STAGE CASCADE BOOSTING VACCINE

**CONTINUING PATENT APPLICATION**  
**TRANSMITTAL LETTER**

Assistant Commissioner for Patents  
Box PATENT APPLICATION  
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

☒ Continuation    ☐ Division    ☐ Continuation-In-Part (CIP)

of the co-pending United States patent application Serial No. 09/138,287, in which no patenting, abandonment, or termination of proceedings has occurred. Priority to application Serial No. 09/138,287 and 08/268,129 now U.S. Patent No. 5,798,100, is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior applications are considered as being part of the disclosure of the accompanying continuing application and are herein incorporated by reference in their entirety.

Enclosed are:

- ☒ Specification, Claim(s), and Abstract ( 44 pages).
- ☐ Informal drawings ( sheets) Figures
- ☒ Declaration and Power of Attorney
- ☒ Preliminary Amendment
- ☐ Assignment of the invention
- ☐ Assignment Recordation Cover Sheet.
- ☐ Check in the amount of \$40.00 for Assignment recordation.

- ☒ Small Entity statement.
- ☐ Information Disclosure Statement.
- ☐ Form PTO-1449 with copies of references.

1c853 U.S. PTO  
09/688089



The filing fee is calculated below:

| Claims<br>as Filed                                   | Included<br>in<br>Basic Fee | Extra<br>Claims | Rate       | Fee<br>Totals |
|--|-----------------------------|-----------------|------------|---------------|
| Basic Fee  |                             |                 | \$710.00   | \$710.00      |
| Total Claims: 8                                      | - 20                        | = 0             | x \$18.00  | = \$0.00      |
| Independents: 2                                      | - 3                         | = 0             | x \$80.00  | = \$0.00      |
| If any Multiple Dependent Claim(s) present:          |                             |                 | + \$270.00 | = \$0.00      |
| SUBTOTAL:  |                             |                 |            | = \$710.00    |
| [ ] Small Entity Fees Apply (subtract 1/2 of above): |                             |                 |            | = \$355.00    |
| TOTAL FILING FEE:                                    |                             |                 |            | = \$355.00    |

- ☒ A check in the amount of \$355.00 to cover the filing fee is enclosed.
- ☐ The Assistant Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Assistant Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date October 16, 2000

By

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